Work Order ID 63395

October 28, 2010 12:34:07 PM

Item ID: D4208-1
Revision ID: PRELIM
Item Name: Insulator
Start Date: 10/28/10 **Start Qty:** 100.00
Required Date: 11/19/10 **Req'd Qty:** 100.00
Reference:

Accept

Setup Start

Stop

Cust Item ID:
Customer:

Run Start

Stop

Approvals: **Process Plan:** CL **Date:** 10/10/28 **Tooling:** _____ **Date:** _____
QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr: D4208 / Revision Nbr: PA1									
100	PURCHASING	0.00							
Purchasing	**Memo**	0.00							
Purchasing	Issue P/O: 12827 Possible Suplier:KEYSTONE ELECT CORP Material release note required								
110	Receive & Inspect for Damage & Mat'l Certs	0.00							
Packaging	**Memo**	0.00							
Packaging	Ensure material certification is attached								
120	QC5- Inspect part completeness to step on W/O	0.00							
QC	**Memo**	0.00							
Quality Control									

CL 10/10/28 100

10/14/12 104

POSITIVE RECALL

counts

8/10/12 +105

as per PA

- inspectors to PA1

Day only

PRELIMINARY ISSUE

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

Work Order ID 63395

October 28, 2010 12:34:07 PM

Item ID: D4208-1
Revision ID: PRELIM
Item Name: Insulator

Start Date: 10/28/10 **Start Qty:** 100.00
Required Date: 11/19/10 **Req'd Qty:** 100.00
Reference:

Accept **Setup Start** **Stop**

Cust Item ID:
Customer:

Run Start **Stop**

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____
QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: Shelf	0.00							
Packaging									
Packaging	**Memo**	0.00							
140	QC21- Final Inspection - Work Order Release	0.00							
QC									
Quality Control	**Memo**	0.00							

11/04/07

11-08-9
104

POSITIVE RECALL
EFFECTIVE 10.10.29 AUTH JW
RELEASED _____ DATE _____

RDF 2334

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

Picklist Print

October 28, 2010 12:34:07 PM

Work Order ID: 63395

Parent Item: D4208-1

Parent Item Name: Insulator

Start Date: 10/28/10 **Required Date:** 11/19/10

Start Qty: 100.00 **Required Qty:** 100.00

Comments: IPP REV:A NEW ISSUE 10-10-22 JLM VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
7685 Insulator		Purchased	No			100	Each	0.0000	1	100			

10/10/11 (104)

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

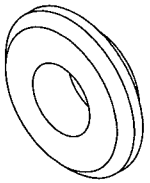
Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

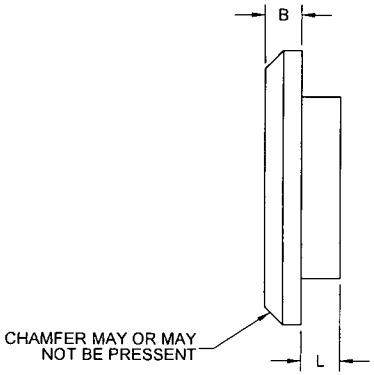
Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

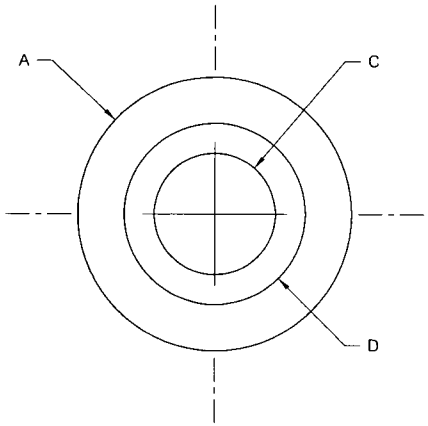
NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

SPECIFICATION CONTROL DRAWING







DART PART NUMBER	DESCRIPTION	MANUFACTURER	MANUFACTURER PART NUMBER	VENDOR	PANEL ENGAGEMENT "L"	OUTSIDE DIAMETER "A"	COLLLAR THICKNESS "B"	INSIDE DIAMETER "C"	PANEL HOLE DIAMETER "D"
D4208-1	NEGATIVE TERMINAL INSULATOR	KEYSTONE ELECTORNICS CORP.	7685	NEWARK	0.032	0.375	0.032	0.171	0.250
D4208-3	POSITIVE TERMINAL INSULATOR	KEYSTONE ELECTRONICS CORP.	7682	NEWARK	0.032	0.385	0.062	0.145	0.240

C2101101 28

W10: 63395

D4208-X INSULATOR

NOTES:
1) MATERIAL: N/A
2) FINISH: N/A
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
4) UNITS: INCHES UNLESS OTHERWISE NOTED
5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
7) WEIGHT: 0.00 lbs

REV.	DESCRIPTION	BY	DATE
PA1	NEW ISSUE		10.09.28

DESIGN		DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN			
CHECKED		DRAWING NO. D4208	REV. PA1 SHEET 1 OF 1
MFG. APPR.			
APPROVED		TITLE INSULATOR	SCALE NTS
DE APPR.			
DATE	10.09.28		

COPYRIGHT © 2010 BY DART AEROSPACE LTD
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.

Dart Aerospace Ltd

W/O:		WORK ORDER CHANGES					
DATE	**STEP**	**PROCEDURE CHANGE**	**By**	**Date**	**Qty**	**Approval** Chief Eng / Prod Mgr	**Approval** QC Inspector

Part No: _____ **PAR #:** _____ **Fault Category:** _____ **NCR:** Yes No **DQA:** _____ **Date:** _____

Resolution: _____ **Disposition:** _____ **QA: N/C Closed:** _____ **Date:** _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	**STEP**	**Description of NC** Section A	**Corrective Action** Section B			**Verification** Section C	**Approval** Chief Eng	**Approval** QC Inspector
			Initial Chief Eng	**Action Description** Chief Eng	**Sign & Date**			

NOTE: Date & initial all entries

Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO12827

Purchase Order Date 10/28/10
PO Print Date 10/28/10

Order From : VC-ELE001

ELECTRO SONIC
1100GORDON BAKER ROAD
WILLOWDALE, ON M2H 3B3
CA

Contact Name		**Buyer**	Chantal Lavoie
Vendor Phone	416 494 1666	**Requisition Nbr**	
Vendor Fax	416 496 3030	**Tax Resale Nbr**	10127-2607
Vendor Account Nbr		**Terms**	Net 30
		Currency	CAD
		FOB	Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAXED 10/10/28

Line Nbr	Reference / Revision ID / Vendor Part Number	Description / Mfg ID	Req Date / Taxable	Req Qty / Unit of Measure	Ship Method	Unit Price	Extended Price
1	7685	Insulator	11/19/10 Yes	100.00 Each	FedEx PI ppd	$0.1250	$12.50
		Special Inst:	AS PER DWG D4208 REV. PA1 B63395 KEYSTONE ELECTRONIC P/N: 7685				
2	7682	Insulator	11/19/10 Yes	100.00 Each	FedEx PI ppd	$0.1250	$12.50
		Special Inst:	AS PER DWG D4208 REV. PA1 B63396 KEYSTONE ELECTRONIC P/N: 7682				
					PO Total:		**$25.00**

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

No substitution or deviation without consent.
Certificate of Conformity or Material Certification required when applicable

Change Nbr: 1 **Change Date:** 10/28/10

electro sonic

We appreciate your business
Nous apprécions de faire affaire avec vous

Electro Sonic Inc.
1100 Gordon Baker Rd.
Toronto, Ontario
M2H 3B3

General Office/Bureau général (416) 494-1666
Inside Sales/Ventes en magasin (416) 494-1555

1-800-56-SONIC
Fax (416) 496-3030
Duns No: 20-164-3921

1-800-56-SONIC
www.e-sonic.com

 11:27

GST/TPS # R101604973

ACCT.# / N° DU COMPTE 110482

SHIP TO / EXPÉDIER À
DART AEROSPACE LTD
1270 ABERDEEN STREET

HAWKESBURY
ON CA K6A 1K7 613 632-3336
ATTN: BLANKET #:

110482
DART AEROSPACE LTD
1270 ABERDEEN STREET

HAWKESBURY
ON CA K6A 1K7

YOUR ORDER NUMBER/VOTRE N° DE COMM.	G.S.T. REGISTRATION #/TPS N°	PROV. LICENSE/PERMIS PROV.	F.O.B./FAB	OUR ORDER NO. NOTRE N° DE COMM.
PO12827 FEDEX 15179324-0			OUR WAREHOUSE	A187684

REFERENCE NO. N° DE RÉF.	ORDER DATE/DATE DE COMM.	TERMS/MODALITÉS	SALES REP REPRÉSENTANT	TERRITORY TERRITOIRE	INSIDE SALES REP VENDEUR EN MAGASIN	SHIPPING DATE/DATE D'EXPÉDITION
A187684	28-OCT-10	NET30		401	T63	10-NOV-10

QUANTITY/QUANTITÉ ORDERED COMMANDÉE	SHIPPED EXPÉDIÉE	BACK ORD. EN RETARD	UNIT UNITÉ	CODE	PRODUCT DESCRIPTION/DÉSIGNATION DE L'ARTICLE	
* * * CUSTOMER REQUIRES CERTIFICATE OF COMPLIANCE * * *						
100	100	0	E EACH	242 7685	KEYSTONE WASHER	1
				*** C of C Required on line 001 ***		
100	100	0	E EACH	242 7682	KEYSTONE WASHER	2
				*** C of C Required on line 002 ***		

ALL SHORTAGES MUST BE REPORTED WITHIN 48 HOURS.
ALL RETURNS MUST BE PRE-AUTHORIZED.
TOUS LES MANQUANTS DOIVENT ÊTRE SIGNALÉS DANS LES 48 HEURES. TOUS LES RETOURS DOIVENT ÊTRE PRÉAUTORISÉS.

CARTON

NO. PKGS. / NBRE DE COLIS

WEIGHT/POIDS

SEE REVERSE FOR LIMITATIONS OF LIABILITY AND CERTIFICATE OF CONFORMANCE/LIMITES DE RESPONSABILITÉ ET CERTIFICAT DE CONFORMITÉ - VOIR AU VERSO

PACKING SLIP/BORDEREAU D'EXPÉDITION

010-1

EMX
ENTERPRISES LIMITED

CERTIFICATE OF CONFORMANCE

250 GRANTON DRIVE
RICHMOND HILL, ONTARIO
L4B 1H7
(905) 764-0040 FAX:(905) 764-0076

COC #:217179
DATE:NOV092010

BILL TO: 000123
ELECTRO SONIC OF AMERICA LLC
1100 GORDON BAKER RD.
WILLOWDALE
ONT.
M2H 3B3

SHIP TO:
ELECTRO SONIC OF AMERICA LLC
600 RIVERWALK PARKWAY
TONAWANDA
NY 14150-5818

ORDER: 00263072 CUSTOMER P/O: B541219 ORDER DATE: OCT262010

QUANTITY	DESCRIPTION
1000	00-7685-00 NYLON SHOULDER WASH/BUSHING ONLY

Sw 11/12
to PAI Dry only

NO VALUE ADDED
ROHS COMPLIANT

A187684 line 1

We hereby certify that the materials used in the manufacture of all articles, in the quantities as called for on the Purchase order, conform to the material specifications required by that Purchase Order. We hereby certify that the material has been manufactured and verified in accordance with the applicable drawings and specifications as required by the referenced Purchase Order.

Authorized Signature: Darshan

Title: QUALITY OFFICER

Date: NOV092010